# FORM D

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#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

## NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

3235-0076

OMB Number:

Expires: April 30, 2008

Estimated average burden hours per response...... 16.00

SEC USE ONLY							
Prefix	Serial						
DATE F	RECEIVED						
<b>I</b>	ı						

Name of Offering ( check if this	s an amendment and r	name has changed, a	and indicate cha	ange.)	·-	<del></del>
Offering of Limited Partnership	Interests (Fourth Tra	nche)				
Filing Under (Check box(es) that a	pply):   Rule 504	☐ Rule 505	☑ Rule 506	☐ Section	on 4(b)	SEC Wall Processing
Type of Filing:   New Filing	☐ Amendment					or or or
	A.	BASIC IDENTIF	ICATION DA	TA		CLU o o 7008
1. Enter the information requeste	d about the issuer					SFI 53 tong
Name of Issuer ( check if this is:	n amendment and nar	ne has changed, and	indicate chang	ge.)		10/5-1
Terra Nova Ventures, LP		_		•		Washington, DC
Address of Executive Office		(Number and Stree	t, City, State, Z	ip Code)	Telephon	e Number (Including Area Code)
2425 East Camelback Road, Suite	e 495, Phoenix, AZ 85		•	i	(602) 346	
Address of Principal Business Ope	ations	(Number and Stree	t, City, State, 2	Zip Code)	Telephon	e Number (Including Area Code)
(if different from Executive Office	rs)			j	-	
				l		
Brief Description of Business						
Investment						
Type of Business Organization						
☐ corporation	☑ limited partner	ship, already forme	d	other (p	lease spo	(
business trust	☐ limited partner	ship, to be formed				08060547
<u> </u>		Month	Year			-
Actual on Estimated Data of Incom	aratian ar Organizatia				☐ Estir	matad
Actual or Estimated Date of Incorp Jurisdiction of Incorporation or Org		two-letter U.S. Pos				nateu
Jurisdiction of incorporation of Org		for Canada; FN fo				DE
				1 1201011011	,	

#### **GENERAL INSTRUCTION**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

# ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

### A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - · Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

2425 East Camelback Road, S Check Box(es) that Apply:  Name (Last name first, if indiving Symington, J. Fife, IV Business or Residence Address 2425 East Camelback Road, S Check Box(es) that Apply:  Name (Last name first, if indiving the second sec	Suite 495, Phoen Idual)  (Number and Stigle 495, Phoen Idual)  (Number and Stigle 495, Phoen	ix, AZ 85016  Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
Business or Residence Address 2425 East Camelback Road, S Check Box(es) that Apply:  Name (Last name first, if indivi- Symington, J. Fife, IV Business or Residence Address 2425 East Camelback Road, S Check Box(es) that Apply:	Suite 495, Phoen Idual)  (Number and Stigle 495, Phoen Idual)  (Number and Stigle 495, Phoen	ix, AZ 85016  Beneficial Owner	☐ Executive Officer	☐ Director	
Business or Residence Address  2425 East Camelback Road, S Check Box(es) that Apply:  Name (Last name first, if indivi- Symington, J. Fife, IV  Business or Residence Address  2425 East Camelback Road, S Check Box(es) that Apply:  Name (Last name first, if indivi-	Suite 495, Phoen Promoter idual Number and St Number and St Suite 495, Phoen	ix, AZ 85016  Beneficial Owner	☐ Executive Officer	☐ Director	
2425 East Camelback Road, S Check Box(es) that Apply:  Name (Last name first, if indiving Symington, J. Fife, IV Business or Residence Address 2425 East Camelback Road, S Check Box(es) that Apply:  Name (Last name first, if indiving the second sec	Suite 495, Phoen Promoter  idual)  (Number and St. Suite 495, Phoen	ix, AZ 85016  Beneficial Owner	☐ Executive Officer	☐ Director	
Name (Last name first, if indiving Symington, J. Fife, IV Business or Residence Address 2425 East Camelback Road, S. Check Box(es) that Apply:	I Promoter  idual)  (Number and St.  Suite 495, Phoen	☐ Beneficial Owner	☐ Executive Officer	☐ Director	
Check Box(es) that Apply:	s (Number and St	Circo Circo			Managing Partner
Business or Residence Address  2425 East Camelback Road, 5  Check Box(es) that Apply:	Suite 495, Phoen	0.00			
Business or Residence Address  2425 East Camelback Road, 5  Check Box(es) that Apply:	Suite 495, Phoen	or Charles and Charles			
Name (Last name first, if indivi		reet, City, State, Zip Code)		<del></del>	
Name (Last name first, if indivi	] Promoter	ix, AZ 85016			
•		図 Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
T. N. 1 C. M. 1 T. 1 1 C. 1 C. 1 C. 1 C. 1 C. 1 C. 1	idual)				
Jahm Najafi Trust Dated 07/3	30/96				
Business or Residence Address	(Number and St	reet, City, State, Zip Code)			
2525 East Camelback Road, S	Suite 850, Phoen	ix, AZ 85016			
Check Box(es) that Apply:	] Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Name (Last name first, if indivi	idual)	<del></del>			
Blue Water Worldwide LLC					
Business or Residence Address		reet, City, State, Zip Code)	·		
102 W. Pennsylvania Avenue,	, Suite 100, Tow	son, MD 21204			
Check Box(es) that Apply:		☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Name (Last name first, if indivi	idual)			<del></del> ·	
TNV Management, LLC					
Business or Residence Address	(Number and St	reet, City, State, Zip Code)			<u></u>
2425 East Camelback Road, S	Suite 495, Phoen	ix, AZ 85016			
	] Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Name (Last name first, if indivi	idual)				<del></del>
Business or Residence Address	(Number and St	reet, City, State, Zip Code)			<del></del>
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Name (Last name first, if indivi	idual)				
Business or Residence Address	Alimber and Gr	reet, City, State, Zin Code)			

					B. 11	NFORMA	TION AB	OUT OFF	ERING						
1.	Has the issu	uer sold, or	does the is	ssuer inter	nd to sell,	to non-acci	redited inve	estors in th	is offering	?				Yes	No ⊠
						Appendix									
2.	What is the	minimum	investmen	t that will	be accept	ed from an	y individua	al?					,,,,,,,	<b>s</b>	N/A
,	D4	or:			. C 1 -	:4									No
3.	Does the of	-												×	
4.	Enter the commission person to be list the nar dealer, you	on or similated is me of the	ar remune an associa broker or	ration for ated perso dealer. If	solicitati on or agen more tha	on of purc t of a brok un five (5)	hasers in er or deale persons t	connection er register o be lister	n with sale	es of secur e SEC and	rities in th Vor with a	e offering state or st	. If a tates,		
Ful	l Name (Last	name first	, if individ	ual)							.,-		<u> </u>		
Bus	siness or Res	idence Add	lress (Num	ber and S	treet, City	, State, Zip	Code)		<u></u>						<del></del>
Nar	ne of Associ	ated Broke	r or Dealer	•			<del></del>								
Star	tes in Which	Person Lis	ted Has So	licited or	Intends to	Solicit Pu	rchasers	- <del></del>		<del></del>		·	<del></del>		
514	(Check "Al													All S	tates
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	MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОH	<u>ok</u>	OR	PA		
	RI	SC]	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR		
Ful	l Name (Last	name first	, if individ	ual)	·- <del></del> -	<del></del>		<del></del>							
Bus	siness or Res	idence Add	lress (Num	ber and S	treet, City,	, State, Zip	Code						···		
Naı	me of Associ	ated Broke	r or Dealer	,				·							
Sta	tes in Which	Person Lis	ted Has So	licited or	Intends to	Solicit Pu	rchasers			<del></del> -	<del></del>	· · · · · · · · ·			
	(Check "Al	Il States" or	r check ind	lividual St	ates)	************	•••••	***************************************			*************		🗆	All S	tates
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	RI	[SC]	SD	TN	TX	{UT}	VT	[VA]	WA)	₩V	<u>w</u> ı	WY	PR		
Ful	l Name (Last	name first	, if individ	ual)	- "						. <u> </u>				
Bus	siness or Res	idence Add	Iress (Num	ber and S	treet, City,	State, Zip	Code	<del></del>			<del></del> -				
Nar	ne of Associ	ated Broke	r or Dealer	<u> </u>	<u> </u>			<u></u>	<u> </u>		<del></del>		<u> </u>		
Sta	tes in Which	Person Lis	ted Has So	licited or	Intends to	Solicit Pur	rchasers	<del></del> -							
	(Check "Al	l States" or	r check ind	ividual St	ates)		••••••••		**************	*********		*************		All S	tates
	AL	AK	AZ	AR	CA	CO	CT	DE	DE	FL	GA	HI	ID		
	[L]	IN	[IA]	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO		
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK.	OR	PA		
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	<u>W</u> [	WY	PR		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Aggregate Type of Security Offering Price Already Sold Debt ..... Equity ..... □ Common ☐ Preferred Convertible Securities (including warrants)..... Partnership Interests.... 2.000.000 \_\_\_\_\_)..... Other (Specify \_\_ Total..... 2,000,000 2,000,000 Answer also in Appendix, Column 3, if the filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of person who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number of of Purchases Investors Accredited Investors Non-accredited Investors Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if the filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Dollar Amount Type of offering Security Sold Rule 505.... Regulation A.... Rule 504

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Total .....

Transfer Agent's Fees.

Printing and Engraving Costs		<b>\$</b> _
Legal Fees	$\boxtimes$	\$ <u>1,000</u>
Accounting Fees		<b>S</b>
Engineering Fees		\$
Sales Commissions (specify finders' fees separately)		<b>s</b>
Other Expenses (identify)		\$
Total	×	\$1,000

b.	and total expenses furnished in response	to Part C - Question 4.a. This difference is the	e "adjusted	ļ		\$ <u>1,999,000</u>
5.	each of the purposes shown. If the amore check the box to the left of the estimate.	unt for any purpose is not known, furnish an es he total of the payments listed must equal the adj	stimate and	1		
				Payments to Officers Directors & Affiliates		Payments to Others
	Salaries and fees			\$	. 0	<b>S</b>
	Purchase of real estate			\$	. 0	<b>s</b>
				s		s
	Construction or leasing of plant buildings ar	d facilities		\$		<b>S</b>
	offering that may be used in exchange	for the assets or securities of another	П	\$	-	•
		ter has duly caused this notice to be signed by the undersigned duly authorized person. If the constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange in furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Porint or Type)  Signature  Signature				\$ \$
		isition of other businesses (including the value of securities involved in this ing that may be used in exchange for the assets or securities of another repursuant to a merger)				
	<del>-</del>		L	J		J
				s	×	\$ <u>1,999,000</u>
	Column Totals			<b>s</b>	⊠	\$ <u>1,999,000</u>
	Total Payments Listed (column totals added	)		×	<b>s</b> _	1,999,000
		D. FEDERAL SIGNATURE	<del></del>		<del></del>	
sigr info	nature constitutes an undertaking by the issuermation furnished by the issuer to any non-a	er to furnish to the U.S. Securities and Exchange	Commissi	e is filed under on, upon writter	Rule ;	505, the following est of its staff, the
	er (Print or Type)	Signature	Date	10 a		
	ra Nova Ventures, LP			18-08,2	800	
	ne of Signer (Print or Type)	1				
Rυ۰		General Partner				
•						

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

2088/026030-0001 953728.01

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

# E. STATE SIGNATURE 1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification Yes No

provisions of such rule?

See Appendix, Column 5, for state response.

 $\boxtimes$ 

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Terra Nova Ventures, LP		4-18-08,2008
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
By: Terra Nova Ventures, GenPar, LLC	General Partner	
By: J. Fife Symington, IV, Manager		

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# **APPENDIX**

1		2	3			4			5 ification
	to non-a	to sell accredited is in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL	1 65	140		IIIVESTOIS	Amount	Investors	Amount	163	110
AK						-			
AZ									
AR									
CA			Limited Partnership Interests; \$2,000,000	2	\$2,000,000	0	0		x
со									
СТ									
DE									
DC									
FL									
GA									
HI									
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# **APPENDIX**

1		2	3 Type of security	4					fication ate ULOE
	to non-a	to sell accredited rs in State 3-Item 1)	and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
				Number of Accredited		Number of Non-Accredited			
State MO	Yes	No		Investors	Amount	Investors	Amount	Yes	No
MT						-			
NE									
NV									
NH					_ <del></del>				
NJ									
NM							<del></del>		
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